

**SEMINOLE COUNTY GOVERNMENT  
AGENDA MEMORANDUM**

**SUBJECT:** 2009 Florida Collegiate Summer League Tourist Tax Agreement

**DEPARTMENT:** Economic Development

**DIVISION:** Tourism Development

**AUTHORIZED BY:** William McDermott

**CONTACT:** Fran Sullivan

**EXT:** 2906

**MOTION/RECOMMENDATION:**

Approve and authorize the Chairman to execute an agreement with Florida Collegiate Summer League for the 2009 Seminole County-based 2nd Annual National High School Invitational in the amount of \$10,000.00.

County-wide

William McDermott

**BACKGROUND:**

Florida Collegiate Summer League's objective is to attract out-of-state high school baseball teams to Central Florida during spring break. Coaches, players and families travel with the teams, resulting in 10-20 hotel rooms per night per team. The High School Invitational is a 16-team tournament. The event will be held March 28, 2009 - April 3, 2009, at Historic Sanford Memorial Stadium. Approximately 624 room nights are projected, and the estimated economic impact from the 6-day event is \$611,104.

The Tourist Development Council and Board of County Commissioners approved funding in the amount of \$5,000 in FY 2005-2006 for the Elite 12 USSSA Tournament. A total of 250 room nights and total direct economic impact of \$573,600 were reported.

Tourist tax funds will be used for promotional expenses, advertising and publicity; and funds are appropriated in Tourism Development's FY 08-09 promotional budget.

**STAFF RECOMMENDATION:**

Staff recommends that the Board approve and authorize the Chairman to execute an agreement with Florida Collegiate Summer League for the 2009 Seminole County-based 2nd Annual National High School Invitational in the amount of \$10,000.00.

**ATTACHMENTS:**

- 1. Agreement

<p><b>Additionally Reviewed By:</b></p> <p><input checked="" type="checkbox"/> Budget Review ( Angela Singleton, Lisa Spriggs )</p> <p><input checked="" type="checkbox"/> County Attorney Review ( Ann Colby )</p>
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**2009 FLORIDA COLLEGIATE SUMMER LEAGUE  
TOURIST DEVELOPMENT TAX AGREEMENT**

**THIS AGREEMENT** is made and entered this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between **SEMINOLE COUNTY**, a political subdivision of the State of Florida, whose address is Seminole County Services Building, 1101 East First Street, Sanford, Florida 32771, hereinafter referred to as "COUNTY", and **FLORIDA COLLEGIATE SUMMER LEAGUE**, whose mailing address is 1778 N. Park Avenue, Suite 201, Maitland, Florida 32751, hereinafter referred to as "FCSL".

**W I T N E S S E T H:**

**WHEREAS**, the Florida State Legislature enacted Section 125.0104, Florida Statutes, known as the Local Option Tourist Development Act in response to the growing need of Florida counties to provide additional revenue sources for tourist development to stimulate the local economy; and

**WHEREAS**, the voters of Seminole County approved by referendum the imposition of the Tourist Development Tax on transient rental accommodations in Seminole County; and

**WHEREAS**, the COUNTY, in coordination with the Tourist Development Council, appropriated Tourist Development Tax revenues to assist in advertising and promoting the Seminole County-based 2<sup>nd</sup> Annual National High School Invitational to be held March 28 - April 3, 2009 at Historic Sanford Memorial Stadium in Sanford, Florida, to promote tourism in Seminole County.

**NOW, THEREFORE**, in consideration of the mutual understandings and agreements set forth herein, the COUNTY and FCSL agree as follows:

**Section 1. Term.** This Agreement shall be in effect until September 30, 2009, unless earlier terminated as provided herein.

**Section 2. Termination.** This Agreement may be terminated by either party at any time, with or without cause, upon not less than

thirty (30) days written notice to the other party as provided for herein or, at the option of the COUNTY, immediately in the event that FCSL fails to fulfill any of the terms, understandings or covenants of this Agreement. The COUNTY shall not be obligated to pay for any services provided or costs incurred by FCSL after FCSL has received notice of termination. Upon said termination, FCSL shall immediately refund to the COUNTY, or otherwise utilize as the COUNTY directs, any unused funds provided hereunder.

**Section 3. Services.**

(a) FCSL shall use funds from this Agreement to promote the 2<sup>nd</sup> Annual National High School Invitational in a manner as to encourage out-of-County visitors to attend the Event. Such effort shall be as described in Exhibit "A" attached hereto and incorporated herein by reference.

(b) The Seminole County Convention and Visitors Bureau logo with telephone numbers and website address must appear on all promotional material for which reimbursement will be requested.

(c) FCSL shall submit proposed advertisement and promotional copy to the COUNTY for review and approval prior to publication. Advertising and promotional copy that has not been approved by the COUNTY shall not be eligible for reimbursement.

(d) Promotional packages for the Event sent out by FCSL must contain a list of Seminole County hotels provided by the Seminole County Convention and Visitors Bureau. No other hotel list may be included in the promotional packet. All such promotional packets must be approved by the COUNTY prior to distribution in order to qualify for reimbursement.

(e) FCSL shall permit a third-party company, as designated by the COUNTY, to conduct on-site surveys during the Event to coordinate the survey process. FCSL shall cooperate in making their Event accessible

in whatever manner necessary for completion of the survey.

(f) After-Event preliminary statistics for room nights and economic impact must be submitted to the COUNTY no later than ninety (90) days after the Event.

(g) FCSL will provide the Seminole County Convention & Visitors Bureau (SCCVB) with a list of participating hotels for the event. The SCCVB will distribute and collect the Hotel Pick Up form, attached hereto and incorporated as Exhibit "D", to participating hotel general managers, to document room nights generated by the event.

(h) FCSL shall be required to have and maintain a website for the purpose of promoting tourism to and attendance at FCSL's Event. Said website shall be linked to the Seminole County Tourism website ([www.visitseminole.com](http://www.visitseminole.com)) and such link shall be maintained throughout the duration of this Agreement.

(i) Failure to comply with or failure to meet the requirements of this Section, including time deadlines, shall result in termination of this Agreement and forfeiture of all financial assistance rendered to FCSL by the COUNTY pursuant to this Agreement.

**Section 4. Liability and Insurance.**

(a) **Liability.** COUNTY, its Commissioners, officers, employees and agents shall not be deemed to assume any liability for the acts, omissions and negligence of FCSL, its officers, employees and agents in the performance of services provided hereunder and FCSL hereby agrees to fully and completely indemnify, insure and hold harmless the COUNTY from and against any liability of whatsoever type or nature howsoever arising, relating in any way to the acts or omissions of FCSL and its officers, members, agents and employees.

(b) **Insurance.**

(1) FCSL shall furnish the COUNTY with a Certificate of Insurance signed by an authorized representative of the insurer

evidencing the insurance required by this Section (Commercial General Liability). The COUNTY, its officials, officers and employees shall be named additional insured under the Commercial General Liability policy. The Certificate of Insurance shall provide that the COUNTY shall be given not less than thirty (30) days written notice prior to the cancellation or restriction of coverage. Until such time as the insurance is no longer required to be maintained by FCSL, FCSL shall provide the COUNTY with a renewal or replacement Certificate of Insurance not less than thirty (30) days before expiration or replacement of the insurance for which a previous certificate has been provided.

(2) The Certificate of Insurance shall contain a statement that it is being provided in accordance with the Agreement and that the insurance is in full compliance with the requirements of the Agreement. In lieu of the statement on the Certificate, FCSL shall, at the option of the COUNTY, submit a sworn, notarized statement from an authorized representative of the insurer that the Certificate is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement.

(3) In addition to providing the Certificate of Insurance, if required by the COUNTY, FCSL shall, within thirty (30) days after receipt of the request, provide the COUNTY with a certified copy of each of the policies of insurance providing the coverage required by this Section.

(4) Neither approval by the COUNTY nor failure to disapprove the insurance furnished by FCSL shall relieve FCSL of FCSL's full responsibility for performance of any obligation including FCSL's indemnification of COUNTY under this Agreement.

(5) Insurance Company Requirements. Insurance companies providing the insurance under this Agreement must meet the following

requirements:

(A) Companies issuing policies must be authorized to conduct business in the State of Florida and prove same by maintaining Certificates of Authority issued to the companies by the Department of Insurance of the State of Florida.

(B) In addition, such companies other than those authorized by Section 624.4621, Florida Statutes, shall have and maintain a Best's Rating of "A" or better and a Financial Size Category of "VII" or better according to A.M. Best Company.

(C) If, during the period which an insurance company is providing the insurance coverage required by this Agreement, an insurance company shall: 1) lose its Certificate of Authority, or 2) fail to maintain the requisite Best's Rating and Financial Size Category, FCSL shall, as soon as FCSL has knowledge of any such circumstance, immediately notify the COUNTY and immediately replace the insurance coverage provided by the insurance company with a different insurance company meeting the requirements of this Agreement. Until such time as FCSL has replaced the unacceptable insurer with an insurer acceptable to the COUNTY, FCSL shall be deemed to be in default of this Agreement.

(6) Specifications. Without limiting any of the other obligations or liability of FCSL, FCSL shall, at FCSL's sole expense, procure, maintain and keep in force amounts and types of insurance conforming to the minimum requirements set forth in this Section. Except as otherwise specified in this Agreement, the insurance shall become effective prior to the commencement of the Event and shall be maintained in force until this Agreement completion date. The amounts and types of insurance shall conform to the following minimum requirements.

(A) Commercial General Liability.

(1) FCSL's insurance shall cover FCSL for those sources of liability which would be covered by the latest edition of the standard Commercial General Liability Coverage Form (ISO Form CG 00 01), as filed for use in the State of Florida by the Insurance Services Office, without the attachment of restrictive endorsements other than the elimination of Coverage C, Medical Payment, and the elimination of coverage for Fire Damage Legal Liability.

(2) The minimum limits to be maintained by FCSL (inclusive of any amounts provided by an Umbrella or Excess policy) shall be as follows:

	<u>LIMITS</u>
General Aggregate	\$Three (3) Times the Each Occurrence Limit
Personal & Advertising Injury Limit	\$1,000,000.00
Each Occurrence Limit	\$1,000,000.00

(7) Coverage. The insurance provided by FCSL pursuant to this Agreement shall apply on a primary basis and any other insurance or self-insurance maintained by the COUNTY or the COUNTY's officials, officers or employees shall be excess of and not contributing with the insurance provided by or on behalf of FCSL.

(8) Occurrence Basis. The Commercial General Liability required by this Agreement shall be provided on an occurrence rather than a claims-made basis.

**Section 5. Billing and Payment.** The COUNTY hereby agrees to provide financial assistance to FCSL up to a maximum sum of TEN THOUSAND AND NO/100 DOLLARS (\$10,000.00) for all services provided hereunder by FCSL during the term of this Agreement in accordance with the project budget and requirements set forth in Exhibit "A". Qualified expenditures are reimbursable upon:

(a) Receipt by the COUNTY of the Request for Funds Form, attached hereto and incorporated herein as Exhibit "B", from FCSL requesting all or part of the above amount. The Request for Funds Form shall be completed properly and documentation attached including original or copies of invoices and copies of canceled checks (front and back). Such request by FCSL shall only be for services specifically provided for herein necessary to serve Seminole County and as authorized under Section 125.0104, Florida Statutes. Said Request for Funds Form shall be submitted no later than ninety (90) days after the Event. **Failure to comply with this requirement shall result in termination of this Agreement and forfeiture of all financial assistance granted to FCSL under this Agreement.**

(b) Verification by the Seminole County Economic Development/Tourism Director that FCSL is providing the services for which reimbursement is sought and has complied with all provisions of this Agreement including all reporting requirements;

(c) The Request for Funds Form shall be accompanied by a detailed report of the economic impact on the COUNTY resulting from the Event, funds for which have been provided hereunder. Such report, attached hereto and incorporated herein as Exhibit "C", shall include, but not be limited to, the actual number of hotel or motel rooms occupied, restaurant meals consumed and estimated goods and services expenditures; and

(d) Payment requests shall be sent to:

Original: Director  
Seminole County Economic Development/Tourism  
1230 Douglas Avenue, Suite 116  
Longwood, Florida 32779

Duplicate: Director, Department of Finance  
Seminole County Services Building  
1101 East First Street  
Sanford, Florida 32771

(e) Reimbursement shall be contingent upon FCSL's compliance with the requirements as stated in Exhibit "A".

**Section 6. Reporting Requirements.** In the performance of this Agreement, FCSL shall maintain books, records and accounts of all activities in compliance with normal accounting procedures. FCSL shall transmit and certify interim records with the Request for Funds Form submitted to the COUNTY. The Request for Funds Form shall detail costs incurred as referenced in Exhibit "A".

**Section 7. Non-Allowable Costs.** The purpose for which Tourist Development Tax grant funds are provided to FCSL shall not duplicate programs for which monies have been received, committed or applied for from another source. The monies provided hereunder shall be expended only for the activities or purposes set forth in Exhibit "A". Non-reimbursable expenditures include, but are not limited to, legal, engineering, accounting, auditing, planning, feasibility studies or other consulting services; real property or capital improvements; interest reduction in deficits and loans; prize money, scholarships, awards, plaques or certificates; private entertainment, lodging, food and beverages; and wages, salaries, administrative or travel expenses other than those appearing, if any, in Exhibit "A".

**Section 8. Unavailability of Funds.** FCSL acknowledges that Tourist Development Tax revenues are the source of funding for this Agreement and that no other COUNTY revenues shall or may be utilized to meet the COUNTY's obligations hereunder. If, for whatever reason, the funds pledged by the COUNTY to this program should become unavailable, this Agreement may be terminated immediately, at the option of the COUNTY, by written notice of termination to FCSL as provided hereinafter. The COUNTY shall not be obligated to pay for any services provided or costs incurred by FCSL after FCSL has received such notice of termination. In the event there are any unused COUNTY funds, FCSL

shall promptly refund those funds to the COUNTY, or otherwise use such funds as the COUNTY directs.

**Section 9. Access to Records.** FCSL shall allow the COUNTY, its duly authorized agent and the public access to such of FCSL's records as are pertinent to all services provided hereunder at reasonable times and under reasonable conditions for inspection and examination in accordance with Florida Statutes.

**Section 10. Liaison.** FCSL shall submit the originals of the Request for Funds form and any other required reports or correspondence to the following:

Director  
Seminole County Economic Development/Tourism  
1230 Douglas Avenue, Suite 116  
Longwood, Florida 32779

**Section 11. Notices.** Whenever either party desires to give notice unto the other, it shall be given in writing by certified United States mail, with return receipt requested, and sent to:

**For COUNTY:**

Director  
Seminole County Economic Development/Tourism  
1230 Douglas Avenue, Suite 116  
Longwood, Florida 32779

**For FCSL:**

Sara Whiting, President  
Florida Collegiate Summer League  
1778 N. Park Avenue, Suite 201  
Maitland, Florida 32751

Either of the parties may change, by written notice as provided above, the person or address for receipt of notice.

**Section 12. Assignments.** Neither party to this Agreement shall assign this Agreement, nor any interest arising herein, without the written consent of the other.

**Section 13. Entire Agreement.**

(a) It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof as well as any previous agreements presently in effect between the parties relating to the subject matter hereof.

(b) Any alterations, amendments, deletions or waivers of the provisions of this Agreement shall be valid only when expressed in writing and duly signed by the parties.

**Section 14. Compliance with Laws and Regulations.** In providing all services pursuant to this Agreement, FCSL shall abide by all statutes, ordinances, rules and regulations pertaining to, or regulating the provisions of, such services including those now in effect and hereafter adopted. Any violation of said statutes, ordinances, rules or regulations shall constitute a material breach of this Agreement, and shall entitle the COUNTY to terminate this Agreement immediately upon delivery of written notice of termination to FCSL as provided hereinabove.

**Section 15. Conflict of Interest.**

(a) FCSL agrees that it will not engage in any action that would create a conflict of interest in the performance of its obligations pursuant to this Agreement with the COUNTY or which would violate or cause others to violate the provisions of Part III, Chapter 112, Florida Statutes, relating to ethics in government.

(b) FCSL hereby certifies that no officer, agent or employee of the COUNTY has any material interest (as defined in Section 112.312(15), Florida Statutes, as over 5%) either directly or indirectly, in the business of FCSL to be conducted here, and that no such person shall have any such interest at any time during the term of this Agreement.

(c) Pursuant to Section 216.347, Florida Statutes, FC SL hereby agrees that monies received from the COUNTY pursuant to this Agreement will not be used for the purpose of lobbying the Legislature or any other State or Federal agency.

**IN WITNESS WHEREOF**, the parties to this Agreement have caused their names to be affixed hereto by the proper officers thereof for the purposes herein expressed on the day and year first above written.

ATTEST:

FLORIDA COLLEGIATE SUMMER LEAGUE



ROB SITZ  
Vice President

By: SARA WHITING  
SARA WHITING  
President

(CORPORATE SEAL)

Date: 12.16.08

ATTEST:

BOARD OF COUNTY COMMISSIONERS  
SEMINOLE COUNTY, FLORIDA

MARYANNE MORSE  
Clerk to the Board of  
County Commissioners of  
Seminole County, Florida

By: BOB DALLARI  
BOB DALLARI, Chairman  
Date: \_\_\_\_\_

For the use and reliance  
of Seminole County only.

As authorized for execution by  
the Board of County Commissioners  
at their \_\_\_\_\_, 20\_\_\_\_  
regular meeting.

Approved as to form and  
legal sufficiency.

\_\_\_\_\_  
County Attorney

AEC/sjs  
12/9/08  
P:\Users\Legal Secretary CSB\Economic Development\2009 Florida Collegiate Summer League.doc

- Attachments:  
Exhibit "A" - Project Description and Expenses  
Exhibit "B" - Request For Funds Form  
Exhibit "C" - Economic Impact Report  
Exhibit "D" - Hotel Pick Up Form

EXHIBIT A

**PART II APPLICATION FOR FUNDS**  
**TOURIST DEVELOPMENT SPONSORSHIP**  
**FY 2008-09**

- (1) NAME OF ORGANIZATION Florida Collegiate Summer League
- (2) NAME OF EVENT 2nd Annual National High School Invitational
- (3) CONTACT PERSON Stefano Foggi
- (4) CONTACT PERSON E-MAIL sfoggi@floridaleague.com
- (5) COMPLETE ADDRESS OF ORGANIZATION:

STREET Click 1778 N. Park Ave. Suite 201

CITY Maitland ST FI ZIP 32751

PHONE: Click321-206-9174 text. CELL: 321-696-6995 FAX: 407-574-7926

- (6) ORGANIZATION'S CHIEF OFFICIAL: Sara Whiting

TITLE: President text. Address if different from above: Click here to enter text.

PHONE: Click here to enter text. CELL: Click here to enter text. FAX: Click here to enter text.

- (7) INTENDED USE OF FUNDS: (Refer to Pages 6-7 – Authorized/Unauthorized Uses of Funds Promotional Expenses, Advertising and Publicity
- (8) AMOUNT REQUESTED \$10,000
- (9) IF ENTIRE REQUEST CANNOT BE FUNDED, CAN THE EVENT BE RESTRUCTURED FOR LESS FUNDING?  YES  NO

## **II DETAILS ON YOUR ORGANIZATION:**

**In narrative form please describe your organization in the following areas. Use a separate sheet to complete these questions in detail.**

**(1) What are your organization's goals and objectives?**

The Florida Collegiate Summer League (FCSL) exists in order to advance and support the development of amateur college level baseball players by operating a summer wood bat baseball league according to the National Collegiate Athletic Association's guidelines. In addition, the FCSL engages in other charitable activities within the meaning of Section 501 (c)(3) and the Internal Revenue Code of 1986. The FCSL builds community by volunteering its players within their local communities. Our goals are to provide a top level competitive baseball experience in a community and fan-friendly environment.

**(2) What services does your organization provide?**

The FCSL provides services for baseball players of several age groups starting with our summer camp that is ages 8-14. We also offer a Collegiate Development League (CDL) which is for high school seniors. The CDL offers an educational and playing opportunity for high school players who will continue on to play college baseball. Our main mission is to provide a summer wood bat league for college baseball players as mentioned above. In addition to baseball activities, the FCSL is integrated within the community and also with local businesses. We offer a fan friendly environment at all of our games through interactive competitions between innings such as dizzy bat, trivia and rubber chicken chuck. Local businesses donate prizes that are given away for these competitions. We also offer advertising mediums for businesses in exchange for sponsorship or in-kind donations. All of our players are engaged in community service within their local community. We have developed a brand new program with the Boys and Girls Club of America in partnership with UBS and Nemours Children Clinic that our players and coaches have worked hard on. The FCSL created and operated the Ken Griffey Youth League, a little league at our 6 community Boys and Girls Clubs. We were responsible for getting all equipment donated and providing the staff to coach the kids. This is the 1st such league in the country. Our players are also involved with local libraries and other community events.

**(3) How will your organization monitor expenditure of funds?**

Stefano Foggi, Business Operations, manages all of the finances for the FCSL. He will monitor all expenditures for the National High School Invitational. Stefano enters every league expense in Microsoft Excel and reports are then generated for every event the FCSL engages in.

**(4) How will your event bring additional visitors and hotel room nights to Seminole County?**

The National High School Invitational is a 16 team high school tournament. Advertisement of this tournament is on the internet. Two local coaches, who are helping organize

the baseball operations of the tournament, also are executing their contacts to bring teams from outside of Seminole County to this tournament. Teams have already committed from as far as California for the 2009 tournament. The objective is to attract out of state teams to Central Florida on a spring break trip with the purpose of playing baseball. All of the out of area teams stay in Seminole County hotels that we have established room blocks with. Traveling with the teams are coaches, players and families resulting in 10-20 rooms per night per team.

(5) What is your organization's experience in managing sponsorships and grants?

The FCSL has a 5 year history of managing sponsorships, grants and donations since this is the primary source of funding for the league. Most recently, the FCSL received a grant from Marion County for the 2008 season which was managed and executed flawlessly. We receive smaller sponsorships for game nights, team meals, media guides, programs and signage. Larger sponsorships are brought in for special events such as the U.S. Military All-Star Series, Celebrity Golf Tournament, The Ken Griffey Jr. Youth League with the Boys and Girls Clubs and the All-Star Game.

**III EVENT INFORMATION (Use additional sheets where necessary.)**

- (1) EVENT NAME: 2nd Annual National High School Invitational
- (2) TYPE OF EVENT: High School Baseball Tournament
- (3) DATE OF EVENT: March 28, 2009 – April 3, 2009

(4) NUMBER OF DAYS: 6 HOURS: FROM: 8:00 AM TO: 10:00 PM

(5) EVENT PROMOTER (IF OTHER THAN YOUR ORGANIZATION)

NAME OF PROMOTER Click here to enter text.

COMPANY NAME Click here to enter text.

ADDRESS: Click here to enter text.

PHONE and FAX Click here to enter text.

(6) PROJECTED NUMBER OF LOCAL PARTICIPANTS,  
GUESTS AND MEDIA 500

(7) PROJECTED NUMBER OF OUT-OF-COUNTY PARTICIPANTS: 272  
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 6

(8) PROJECTED NUMBER OF OUT-OF-COUNTY GUESTS OF PARTICIPANTS: 68  
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 6

(9) PROJECTED NUMBER OF OUT-OF-COUNTY MEDIA PERSONS: 0  
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 0

(10) PROVIDE THE ESTIMATED DIRECT ECONOMIC IMPACT ON SEMINOLE COUNTY FROM YOUR  
EVENT (The Eco Impact form for the application can be found on the website): \$611,104.00

(11) WHAT IS THE GUARENTEED MINIMUM NUMBER OF ROOM NIGHTS YOUR EVENT WILL  
BRING TO SEMINOLE COUNTY? 624

**Note: This number is the minimum number of rooms that must be captured by the event and documented by submitting the Room Night Pick-Up Form (Exhibit D) within 90 days of the conclusion of the event. Failure to meet this minimum room night guarantee, the total amount of grant disbursement will be decided by the Seminole County CVB.**

(12) PROVIDE A LIST OF OTHER EVENT SPONSORS AND THE AMOUNT(S) OF THEIR  
SPONSORSHIPS. Though our sponsors for this year's event have not yet been confirmed, last year CoAdvantage gave a \$500 sponsorship and Lindquist Law Firm gave a \$200 sponsorship.

(13) PROVIDE THE LOCATION, CONTACT NAME AND PHONE NUMBER FOR THE EVENT FOR THE  
LAST THREE YEARS. Historic Sanford Memorial Stadium, 1201 Melonville Rd. Sanford, FL  
CONTACT Gene Manning, Stadium Superintendent, (407) 688 – 5000 ext. 5604

(14) PLEASE PROVIDE DETAILS OF HOW THE EVENT WILL WORK. This is a 16 team tournament and all teams are guaranteed 4 games. There will be an opening ceremony, home run derby and awards ceremony. April 1st is an off day which is designed for out of town teams to enjoy the local attractions of Seminole County and the rest of Central Florida.

**Exhibit C  
Seminole County - Economic Impact**

	Quantity	Multiplier	Event days	TOTALS
How much will event organizers spend locally?				\$ 1,500.00
How many adult out-of state participant days expected?	272	\$ 152.00	6	\$ 248,064.00
How many adult out-of state spectator days expected?	68	\$ 152.00	6	\$ 62,016.00
How many out-of state media/professional days expected?	0	\$ 152.00	6	\$ -
How many youth out-of state participant days are expected?	136	\$ 76.00	6	\$ 62,016.00
How many youth out-of state spectator days are expected?	68	\$ 76.00	6	\$ 31,008.00
How many in state participant/spectator/media/ professionals expected?	500	\$ 68.00	6	\$ 204,000.00
What is the expected event-site spending?				\$ 2,500.00
What other expenditures, if any, are anticipated?				
<b>TOTAL DIRECT IMPACT =</b>				<b>\$ 611,104.00</b>
	Direct Impact	Divider	Multiplier	
Total output economic impact:	\$ 611,104.00		1.5	\$ 916,656.00
Total earnings impact:	\$ 611,104.00		0.57	\$ 348,329.28
Total employment impact:	\$ 611,104.00	1,000,000	22	13.44
		Non-Taxable		
	Direct Impact	Sales	Sales Tax Rate	
<b>STATE SALES TAX GENERATED:</b>	\$ 611,104.00	\$ 3,000.00	0.06	\$ 36,486.24
		State Sales Tax	Florida DOR	
		Generated	Disbursement	
<b>STATE SALES TAX REIMBURSED TO COUNTY:</b>		\$ 36,486.24	0.09653	\$ 3,522.02
		Non-Taxable	Option Sales	
	Direct Impact	Sales	Tax Rate	
<b>COUNTY LOCAL OPTION SALES TAX:</b>	\$ 611,104.00	\$ 3,000.00	0.01	\$ 6,081.04
	Estimated	Approximate Hotel	Average Room	
	Per Night To Be Secured	Rooms Secured	Rate Per Night	
<b>TOTAL HOTEL IMPACT:</b>		624	\$92.50	\$ 57,720.00
	Total Hotel			
	Impact		Resort Tax Rate	
<b>COUNTY RESORT TAX RECOUPED:</b>	\$ 57,720.00		0.03	\$ 1,731.60
<b>TOTAL RESORT TAX &amp; STATE SALES TAX RECOUPED BY COUNTY:</b>				\$ 11,334.66
<b>RENTAL COSTS OF FACILITIES OWNED &amp; RECOUPED BY THE COUNTY:</b>				\$ -
<b>RENTAL COSTS OF FACILITIES OWNED &amp; RECOUPED BY THE CITY:</b>				\$ -
<b>BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE COUNTY:</b>				\$ -
<b>BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE CITY:</b>				\$ -
<b>APPROXIMATE REVENUE RECOUPED BY THE COUNTY ON THE EVENT:</b>				\$ 11,334.66

**IV SPORTING EVENT (If Applicable)**

- (1) NAME OF SPORT/EVENT: 2nd Annual High School Invitational
- (2) LOCATION OF EVENT: (IF MORE THAN ONE, LIST ON SEPARATE SHEET.)  
Historic Sanford Memorial Stadium
- (3) TOTAL NUMBER OF FIELDS NEEDED: 2
- (4) TOTAL NUMBER OF FIELDS NEEDED PER DAY: 2
- (5) NUMBER OF LIGHTED FIELDS REQUIRED: 1
- (6) PROVIDE FIELD USE TIMES BY DAY: March 28, 2009 – April 3, 2009: 8:00 AM – 10:00 PM
- (6) SPECIAL FIELD REQUIREMENTS (PLEASE SPECIFY): Click here to enter text.

**V OTHER OUTDOOR EVENT:**

- (1) LOCATION AND SIZE OF EVENT VENUE: Click here to enter text.
- (2) SPECIAL SITE REQUIREMENTS: Click here to enter text.

**EVENT BUDGET SUMMARY**

**INCOME SOURCES:**

TOURIST DEVELOPMENT TAX REQUEST \$10,000

ADDITIONAL FUNDING SOURCES (Seminole County cannot be sole source.)

Advertising Sponsorships \$5,000

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Click here to enter text.\$ Click here to enter text.

TOTAL ADDITIONAL FUNDS \$ 5,000

**OTHER INCOME SOURCES**

Team Payments \$ 11,900

Gate/Merchandise Fees\$ 11,000

Media Guide\$ 4,000

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Click here to enter text.\$ Click here to enter text.

TOTAL OTHER INCOME \$ 26,900

TOTAL INCOME ALL SOURCES \$ 41,900

**EVENT EXPENSES:**

Provide an itemized summary indicating the intended use of TDC funds. Please be as explicit as possible, including intended publications, promotional materials, etc. and how much money will be expended (tentatively) for each category. Use additional sheets if necessary.

**Intended Utilization of Tourist Tax Funds**

(Please refer to authorized and unauthorized uses on page 6-7)

Promotional Mailing to College Coaches, Professional Scouts and Media \$1,000

Radio Advertisements prior to event \$1,000

Program/Media Guide to be mailed out prior to event \$2,500

Website Ads and Newsletter Services \$3,000

Field Rental \$2,500

Click here to enter text. Click here to enter text.

**Total Tourism Funds:** \$10,000

**Other Event Expenses**

Umpires \$4,000

Statistician \$2,000

Baseballs \$1,000

FHSAA Fees \$500

Awards \$450

T-Shirts and Gate Passes \$2,150

**Total Other Event Expenses** \$10,100

**TOTAL EVENT EXPENSES** \$20,100

**CERTIFICATION**

I have reviewed this Application for Funds from the Tourist Development Council for FY 2008-09. I am in full agreement with the information contained herein. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.

  
\_\_\_\_\_  
Chief Corporate Officer

  
\_\_\_\_\_  
Date

Seal

\_\_\_\_\_  
Corporation Secretary

\_\_\_\_\_  
Date

EXHIBIT "B"  
REQUEST FOR FUNDS

SEMINOLE COUNTY TOURISM DEVELOPMENT  
1230 DOUGLAS AVENUE, #116, LONGWOOD FL 32779

EVENT NAME \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME OF CONTACT \_\_\_\_\_ CONTACT TELEPHONE \_\_\_\_\_

CONTACT E-MAIL \_\_\_\_\_

EVENT DATE FROM \_\_\_\_\_ TO \_\_\_\_\_

REQUEST # \_\_\_\_\_

( ) INTERIM REPORT ( ) FINAL REPORT

TOTAL CONTRACT AMOUNT \$ \_\_\_\_\_

<u>EXPENSE</u>	<u>BUDGET</u>	<u>REIMBURSEMENT REQUESTED</u>
_____	_____	_____
_____	_____	_____
TOTALS	_____	_____

(For Final Report only)  
Please complete the following:

#of Hotels used \_\_\_\_\_

#of Hotel room nights \_\_\_\_\_

#of out-of-town participants \_\_\_\_\_

#of out-of-town fans \_\_\_\_\_

#of out-of-town media \_\_\_\_\_

Total direct economic impact \$ \_\_\_\_\_

NOTE: Furnishing false information may constitute a violation of applicable State and Federal laws.

CERTIFICATION OF FINANCIAL OFFICER: I certify that the above information is correct based on our official accounting system and records, consistently applied and maintained and that the cost shown have been made for the purpose of and in accordance with, the terms of the contract. The funds requested are for reimbursement of actual cost made during this time period.

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

Exhibit C

Seminole County - Economic Impact

	Quantity	Multiplier	Event days	TOTALS
How much will event organizers spend locally?				
How many adult out-of state participant/spectator days are expected?	\$	143.00		\$ -
How many youth out-of state participant/spectator days are expected?	\$	72.00		\$ -
How many adult in-state participant/spectator days are expected?	\$	125.00		\$ -
How many youth in-state participant/spectator days are expected?	\$	63.00		\$ -
How many out-of state media/professionals expected?	\$	143.00		\$ -
How many in state media/professionals expected?	\$	125.00		\$ -
What is the expected event-site spending?				
What other expenditures, if any, are anticipated?				
<b>TOTAL DIRECT IMPACT =</b>				\$ -
	Direct Impact	Divider	Multiplier	
Total output economic impact:	\$ -		1.5	\$ -
Total earnings impact:	\$ -		0.57	\$ -
Total employment impact:	\$ -	1,000,000	22	\$ -
	Direct Impact	Non-Taxable Sales	Sales Tax Rate	
<b>STATE SALES TAX GENERATED:</b>	\$ -		0.06	\$ -
			Florida DOR	
		State Sales Tax Generated	Disbursement Multiplier	
<b>STATE SALES TAX REIMBURSED TO COUNTY:</b>	\$ -		0.09653	\$ -
	Direct Impact	Non-Taxable Sales	Option Sales Tax Rate	
<b>COUNTY LOCAL OPTION SALES TAX:</b>	\$ -		0.01	\$ -
	Estimated Rooms	Approximate Hotel Rooms Secured	Average Room Rate Per Night	
	Per Night To Be Secured			
<b>TOTAL HOTEL IMPACT:</b>				\$ -
	Total Hotel Impact		Resort Tax Rate	
<b>COUNTY RESORT TAX RECOUPED:</b>	\$ -		0.05	\$ -
<b>TOTAL RESORT TAX &amp; STATE SALES TAX RECOUPED BY COUNTY:</b>				\$ -
<b>RENTAL COSTS OF FACILITIES OWNED &amp; RECOUPED BY THE COUNTY:</b>				\$ -
<b>RENTAL COSTS OF FACILITIES OWNED &amp; RECOUPED BY THE CITY:</b>				\$ -
<b>BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE COUNTY:</b>				\$ -
<b>BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE CITY:</b>				\$ -
<b>APPROXIMATE REVENUE RECOUPED BY THE COUNTY ON THE EVENT:</b>				\$ -



## SEMINOLE COUNTY CONVENTION & VISITORS BUREAU (CVB)

### ROOM NIGHT PICKUP CERTIFICATION FORM

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#### Request for Room Night Pick-UP

*Attn: General Manager, please provide the room night information for the event dates listed below as soon as possible:*

**Hotel Name/ Location:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Group Name:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Event Dates:** \_\_\_\_\_

I certify the organization/event listed above consumed the following room nights:

**Total Number of Room Nights Picked up from Events** \_\_\_\_\_

**GM Signature:** \_\_\_\_\_

The purpose of this form is to **certify the number of local hotel room nights in Seminole County attributable to this event.**

The Seminole County CVB reserves the right to unilaterally reduce the maximum amount of any grant awarded should the applicant's room night guarantee not be satisfied or documented with this Room Night Pick Up Certification Form.

Your cooperation in completing this form is greatly appreciated. For additional information please contact Sharon Sears, CVB Executive Director at (407) 665-2901.

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